S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 15 / 80
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	Our Common Values PAC			
۹.	Full Name (Last, First, Middle Initial) Eric L. Gold			Date of Receipt
	Mailing Address 20700 Ventura Blvd. #328			06 01 2006
	City	State	Zip Code	Transaction ID: C3323916
	Los Angeles	CA	91364	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Mosaic Media Group, Inc.	Occupation Executive		
	Receipt For: 2006	Aggregate	Year-to-Date ▼	
	Primary X General		1000.00	1
	Other (specify) ▼	0 0	1000.00	
3.	Full Name (Last, First, Middle Initial) Ellen Goldsmith-Vein			Date of Receipt
	Mailing Address 9255 Sunset Blvd., #515			06 7 7 2006
	City	State	Zip Code	Transaction ID: C3324773
	Los Angeles	CA	90069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2500.00
	Name of Employer The Gotham Group, Inc.	Occupation Founder/		
	Receipt For: 2006	Aggregate	e Year-to-Date ▼	
	Primary X General Other (specify) ▼		2500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Cambria Gordon			Date of Receipt
	Mailing Address 640 Ocampo Drive			M M / D D / Y Y Y Y
	·	01-1-	7'- 0-1-	06 30 2006
	City Pacific Palisades	State CA	Zip Code 90272	Transaction ID: C3324799 Amount of Each Receipt this Period
	FEC ID number of contributing		00272	
	federal political committee.	С		500.00
	Name of Employer 20th Century Fox Televisi- on	Occupation Executive	n e Producer	
	Receipt For: 2006	Aggregate	e Year-to-Date ▼	
	Primary X General Other (specify) ▼	0 0	500.00	
SUBTOTAL of Receipts This Page (optional)				
_	CETAL OF HOSCIPLO THIS Fage (optional)			
T	OTAL This Period (last page this line number or	nly)		